

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

* 04-191

Louise H. Renne

Renne Sloan Holtzman

188 The Embarcadero

Suite 200

San Francisco, CA

94105

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature

X

M. ALLEN

☐ Agent☐ Addressee

D. Is delivery address different from

If YES, enter

No

Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

DOCKET NO. 04-191

7003 1010 0002 4028 2617

CERTIFIED

MAIL

REQUESTED

* 04-191

Louise H. Renne

Renne Sloan Holtzman & Sakai

50 California St.

Suite 2100

San Francisco, CA 94111

C. R. R. NO.

ORDER DATED

6-1-05

FCC 05/1/98

MIMEOGRAPH NO.